# JC14 Rec'd PCT/PTO 12 MAY 2005

# Application Data Sheet APPLICATION INFORMATION

Application Number::

Filing Date:: May 12, 2005

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: LEVEL, ANGLE AND DISTANCE

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MEASURING DEVICE

Attorney Docket Number:: P2481US

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?:: Yes

Latin Name::

Variety denomination name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

**Contract or Grant Numbers::** 

Secrecy Order in Parent Appl.?:: No

Initial 05/12/05

#### APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: GB

Status:: Full Capacity

Given Name:: Alan

Middle Name:: George

Family Name:: Rock

Name Suffix::

City of Residence:: Bicester

State or Prov. of Residence:: Oxfordshire

Country of Residence:: GB

Street of mailing address:: 1 Shelley Close

City of mailing address:: Bicester

State or Province of mailing address:: Oxfordshire

Country of mailing address:: GB

Postal or Zip Code of mailing address:: OX26 2YZ

Inventor Authority Type:: Inventor

Primary Citizenship Country:: GB

Status:: Full Capacity

Given Name:: James

Middle Name:: Angus

Family Name:: Rock

Name Suffix::

City of Residence:: Oxford

State or Prov. of Residence:: Oxfordshire

Country of Residence:: GB

Street of mailing address:: 14 Scholar Place, Off Arnold Way, Cumnor Hill

City of mailing address:: Oxford

State or Province of mailing address:: Oxfordshire

Country of mailing address:: GB

Postal or Zip Code of mailing address:: OX2 9RD

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#### CORRESPONDENCE INFORMATION

Correspondence Customer Number::

08968

Phone:

312-569-1000

Fax:

312-569-3000

E-mail Address:

ipdocket@gcd.com

# REPRESENTATIVE INFORMATION

Representative Customer Number:

08968

Representative Designation:

**Registration Number:** 

Representative Name:

# **DOMESTIC PRIORITY INFORMATION**

Application:

Continuity Type:

Parent Application:

Parent Filing Date:

This application is a

National Stage of

PCT/GB2003/004945

11/14/2003

#### FOREIGN APPLICATION INFORMATION

Country:

**Application Number:** 

Filing Date:

**Priority Claimed** 

GB

0226764.9

11/15/2002

Yes

GB

0304651.3

02/28/2003

Yes

# **ASSIGNEE INFORMATION**

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

CH01/ 12423505.1

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